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## \*BIBDATASHEET\*

CONFIRMATION NO. 5376

Bib Data Sheet

SERIAL NUMBER 10/072,220	FILING DATE 02/08/2002  RULE	CLASS 705	GROUP ART UNIT 3625	ATTORNEY DOCKET NO. 9623/374
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## APPLICANTS

Narinder Pal Singh, Half Moon Bay, CA;

Darren J. Davis, Rowland Heights, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/918,241 07/30/2001 \*  
which is a CON of 09/322,677 05/28/1999 PAT 6,269,361  
(\*Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/04/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	CA	32	44	3

## ADDRESS

56020  
BRINKS HOFER GIBSON & LIONE / YAHOO! OVERTURE  
P.O. BOX 10395  
CHICAGO , IL  
60610

## TITLE

AUTOMATIC FLIGHT MANAGEMENT IN AN ONLINE MARKETPLACE

FILING FEE  RECEIVED 1602	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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11-20-2005



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SERIAL NUMBER 10/072,220	FILING DATE 02/08/2002  RULE	CLASS 705 / 14	GROUP ART UNIT 3625	ATTORNEY DOCKET NO. 9623/374	
<b>APPLICANTS</b>  Narinder Pal Singh, Half Moon Bay, CA;  Darren J. Davis, Rowland Heights, CA;  *** CONTINUING DATA ***** This application is a CIP of 09/918,241 07/30/2001 * which is a CON of 09/322,677 05/28/1999 PAT 6,269,361 (*Data provided by applicant is not consistent with PTO records.  *** FOREIGN APPLICATIONS *****  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/04/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY CA	SHEETS DRAWING 32	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 3
ADDRESS 56020 BRINKS HOFER GIBSON & LIONE / YAHOO! OVERTURE P.O. BOX 10395 CHICAGO , IL 60610					
TITLE AUTOMATIC FLIGHT MANAGEMENT IN AN ONLINE MARKETPLACE					
FILING FEE  RECEIVED 1602	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____		



Bib Data Sheet

CONFIRMATION NO. 5376

<b>SERIAL NUMBER</b> 10/072,220	<b>FILING DATE</b> 02/08/2002 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2165 3625	<b>ATTORNEY DOCKET NO.</b> 9623/374
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**APPLICANTS**

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Darren J. Davis, Rowland Heights, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/918,241 07/30/2001 \*  
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\*\* 04/04/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 32	<b>TOTAL CLAIMS</b> 44 40	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

00757

**TITLE**

Automatic flight management in an online marketplace

<b>FILING FEE RECEIVED</b> 1302	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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